

site who have been responsible for all underwater recovery operations. In particular, I wish to commend the Navy's divers for their heroic work in some of the most difficult working conditions imaginable. Despite working at depths of over 100 feet, in water in which visibility is measured in inches instead of feet, these Navy divers have logged some 1,300 hours—the equivalent of 54 straight days—searching a 25 square mile patch of ocean floor. These divers are directly responsible for the recovery of nearly half of the victims as well as for the majority of the wreckage salvaged thus far.

I would also like to commend the men and women of the Coast Guard who were involved in the search, rescue, and recovery operation immediately following the crash. Specifically, I wish to recognize those workers who arrived at the crash site within minutes of the explosion to begin searching for survivors. Working tirelessly, Coast Guard personnel recovered victims and pieces of the aircraft throughout the night and the following days. In subsequent weeks, Coast Guard workers have conducted surface recovery operations, centralized search planning, as well as regional environmental operations. In the 2 months since the Flight 800 explosion, the Coast Guard has searched over 3,100 square miles of the ocean's surface, recovering more than half of the victims from the water in the process.

Finally, I would like to recognize the NTSB for its candor, honesty, and tenacity in conducting the investigation effort. The men and women of the NTSB have done an admirable job of keeping the victims' families and the American public well informed of the status of the recovery effort and crash investigation.

Mr. Speaker, I know my colleagues will join me in extending a heartfelt thanks to these exemplary men and women for the time and effort they have selflessly dedicated to the recovery effort. I commend them for a job well done.

As a final note, I would like to recognize Mr. Henry Allen, who correctly pointed out to me that Congress has not yet credited the Navy, Coast Guard, and NTSB personnel working in this investigation for their work. Mr. Allen lost his son and grandson in the TWA crash, but his unselfish and caring character allowed him to ask me to recognize the hard work and dedication of these personnel even in his time of need. I'm proud to serve men like Mr. Allen, and my thoughts, prayers, and condolences are with him and his family.

## NATIONAL INVASIVE SPECIES ACT OF 1996

SPEECH OF

HON. ROBERT A. UNDERWOOD

OF GUAM

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, September 24, 1996*

Mr. UNDERWOOD. Mr. Speaker, I rise in favor of H.R. 3217, the National Invasive Species Act of 1996. This bill would reauthorize funds for the Brown Tree Snake Control Program which seeks to reduce the adverse effects of the nonindigenous brown tree snake to Guam as well as prevent the spread of the species to other outlying areas.

Brown tree snakes have long been identified as the cause of Guam's diminishing bird population and the extinction of some of the is-

land's native species. Due to the lack of natural predators and to the ideal environment Guam provides for the propagation of the snakes, the brown tree snake has continually wreaked havoc on Guam's wildlife. If this present trend continues, we can soon expect the extinction of more of Guam's native birds and the introduction of this pest to snakeless areas such as Hawaii.

Controlling the snake population on Guam is the best approach towards wildlife preservation. In a misguided attempt to save Guam's birds, the U.S. Fish and Wildlife Service has imposed a wildlife refuge in the hopes that such a refuge would reverse the trend of a diminishing bird population. This notion is flawed at best. We know for a fact that the nonindigenous brown tree snakes must be taken out of the habitat in order for birds to thrive. Guam supports saving its endangered species but this must be done through the U.S. Fish and Wildlife Service controlling the brown tree snake population and not by them acquiring more land. After all, a wildlife refuge would only serve to gather the island's remaining bird species in an area that could easily be overrun by the brown tree snake. In a couple of years, this proposed bird sanctuary would surely be nothing more than a snakepit taken right out of an Indiana Jones movie.

The funds reauthorized by H.R. 3217 offer an alternative that imposes the least burden on Guam's limited resources and gives Guam's birds the best chance at survival. Providing for the development of programs to control the snake population also spares Guam's neighbors from the devastation brought about by the brown tree snake. Let us not allow harmful nonindigenous species to take over our fragile ecosystems. I urge my colleagues to support H.R. 3217.

## LACK OF HEALTH INSURANCE— HIGHER DEATH RATE

HON. FORTNEY PETE STARK

OF CALIFORNIA

IN THE HOUSE OF REPRESENTATIVES

*Friday, September 27, 1996*

Mr. STARK. Mr. Speaker, health insurance for everyone isn't just a nice idea, it is a matter of life and death. The data is clear. In 1982, the State of California terminated Medi-Cal benefits for the State's 270,000 medically indigent adults. Some 186 of these adults were then enrolled in a study to examine the effects of this action on the health of these individuals. A comparison group was also established. Within 6 months of termination of health coverage, five individuals died compared to zero deaths for the comparison group. After 1 year of the study, seven individuals from the group whose Medi-Cal benefits had been terminated had died compared to one death in the comparison group.

Investigation of the circumstances of death suggest that lack of access to care played a part in at least four of the deaths in the medically indigent group. At least four deaths that could have been prevented if these individuals had health insurance. And now this Congress is preparing to adjourn without having adequately addressed one of the greatest problems facing our Nation: the lack of health insurance for everyone. How many more people will have to die before we decide to commit ourselves to this problem and find a solution?

Another study used data from 17 hospitals to examine outcomes for patients admitted with pneumonia. Self-pay patients were six times more likely to die with in the hospital compared to those with insurance. A national study determined that the probability of an in-hospital death for uninsured patients was 1.08 to 1.32 times higher than for privately insured patients in 15 of 16 age-sex-rate cohorts.

In another study, a representative cohort of the U.S. population was followed for up to 16 years. The study hypothesis in this case was that a lack of health insurance is causally related to a higher mortality rate, because of decreased access and lower quality of care. Not only is this hypothesis in accordance with the results of previous studies, but it also agrees with the conclusions of our own former Office of Technology Assessment in a report issued in 1992.

Furthermore, the study found that lacking insurance is associated with subsequent higher mortality independent of our risk factors.

### INDEPENDENT OF OTHER RISK FACTORS

In one of the same studies mentioned above, fully 68 percent of the study's participants in the medically indigent group reported a specific episode in which they had not obtained care that they believed they needed; of those patients, 78 percent listed the cost as a reason for not obtaining care. We cannot let this problem escalate into a national tragedy of even greater proportions.

The numbers are alarming. The evidence is clear. As members of a civilized society, I would hope that the next Congress has the courage to deal with this issue.

For those who share my concerns, I invite you to reference the following sources:

(1) Lurie, N., Ward, N.B., Shapiro, M.F., Brook, R.H., "Termination from Medi-Cal: does it affect health?" *N Engl J Med.* 1984; 311: 480-484.

(2) Lurie, N., Ward, N.B., Shapiro, M.F., Gallego, C., Vaghaiwalla, R., Brook, R.H., "Termination of medical benefits: a follow-up study one year later." *N Engl J Med.* 1986; 314: 1266-1268.

(3) Weissman, J.S., Epstein, A.M., "Falling Through the Safety Net: The Impact of Insurance on Access to Care." Baltimore, Md: Johns Hopkins University Press; 1994.

(4) Franks, P., Clancy, C.M., Gold, M.R., "Health insurance and mortality: evidence from a national cohort," *JAMA.* 1993; 270: 737-741.

## OLYMPIC GOLD MEDALIST CHRYSTE GAINES IS HONORED

HON. EDDIE BERNICE JOHNSON

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Friday, September 27, 1996*

Ms. EDDIE BERNICE JOHNSON of Texas. Mr. Speaker, I rise to give recognition to a Dallas unsung heroine, Chryste Gaines, a 1996 Olympic Gold Medalist. Ms. Gaines propelled the team to its victory as the first leg of the 4100 women's relay.

Chryste Gaines' fruitful track career began as she set many personal and team records in the State of Texas. She has also received a gold medal at both the world championships 4100 relay and at the Pan Am games in the 100-meter dash. In addition, she has brought